

Fill in this information to identify your case:	
United States Bankruptcy Court for the	
Peil _____	District of <u>Jeff</u>
Case number (if known): _____	Chapter you are filing under:
	<input checked="" type="checkbox"/> Chapter 7
	<input type="checkbox"/> Chapter 11
	<input type="checkbox"/> Chapter 12
	<input type="checkbox"/> Chapter 13

☐ Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, “Do you own a car,” the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1 Identify Yourself

	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1. Your full name Write the name that is on your government-issued picture identification (for example, your driver's license or passport) Bring your picture identification to your meeting with the trustee	<u>Jeff</u> First name _____ Middle name Peil Last name _____ Suffix (Sr, Jr, II, III)	 First name _____ Middle name _____ Last name _____ Suffix (Sr, Jr, II, III)
2. All other names you have used in the last 8 years Include your married or maiden names.	 First name _____ Middle name _____ Last name _____ First name _____ Middle name _____ Last name	 First name _____ Middle name _____ Last name _____ First name _____ Middle name _____ Last name
3. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	XXX - XX - <u>5</u> <u>1</u> <u>9</u> <u>3</u> OR <u>9</u> XX - XX - _____	XXX - XX - _____ OR <u>9</u> XX - XX - _____

Debtor 1 Jeff Peil
First Name Middle Name Last Name

Case number (if known) _____

About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):	
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	<input checked="" type="checkbox"/> I have not used any business names or EINs Business name _____ Business name _____ EIN _____ EIN _____	<input type="checkbox"/> I have not used any business names or EINs Business name _____ Business name _____ EIN _____ EIN _____	
5. Where you live	<p>7405 Chippewa Drive Number Street</p> <p>Wonder Lake IL 60097 City State ZIP Code</p> <p>McHenry County</p> <p>If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.</p> <p>Number Street</p> <p>P O Box</p> <p>City State ZIP Code</p>	<p>If Debtor 2 lives at a different address:</p> <p>Number Street</p> <p>City State ZIP Code</p> <p>County</p> <p>If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.</p> <p>Number Street</p> <p>P O Box</p> <p>City State ZIP Code</p>	
6. Why you are choosing this district to file for bankruptcy	<p>Check one</p> <p><input checked="" type="checkbox"/> Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.</p> <p><input type="checkbox"/> I have another reason. Explain (See 28 U.S.C § 1408.)</p> <p>_____ _____ _____ _____</p>	<p>Check one</p> <p><input type="checkbox"/> Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.</p> <p><input type="checkbox"/> I have another reason. Explain (See 28 U.S.C § 1408.)</p> <p>_____ _____ _____ _____</p>	

Debtor 1 Jeff Peil
First Name Middle Name Last Name

Case number (if known) _____

Part 2 Tell the Court About Your Bankruptcy Case

7. The chapter of the Bankruptcy Code you are choosing to file under

Check one. (For a brief description of each, see *Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy* (Form 2010)). Also, go to the top of page 1 and check the appropriate box.

- ☒ Chapter 7
☐ Chapter 11
☐ Chapter 12
☐ Chapter 13

8. How you will pay the fee

- ☒ I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.
- ☐ I need to pay the fee in installments. If you choose this option, sign and attach the *Application for Individuals to Pay The Filing Fee in Installments* (Official Form 103A).
- ☐ I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments) If you choose this option, you must fill out the *Application to Have the Chapter 7 Filing Fee Waived* (Official Form 103B) and file it with your petition.

9. Have you filed for bankruptcy within the last 8 years?

- ☒ No
- ☐ Yes District _____ When _____ Case number _____
MM / DD / YYYY
- District _____ When _____ Case number _____
MM / DD / YYYY
- District _____ When _____ Case number _____
MM / DD / YYYY

10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?

- ☒ No
- ☐ Yes Debtor _____ Relationship to you _____
District _____ When _____ Case number, if known _____
MM / DD / YYYY
- Debtor _____ Relationship to you _____
District _____ When _____ Case number, if known _____
MM / DD / YYYY

11. Do you rent your residence?

- ☐ No Go to line 12.
- ☒ Yes Has your landlord obtained an eviction judgment against you and do you want to stay in your residence?
- ☒ No Go to line 12
- ☐ Yes Fill out *Initial Statement About an Eviction Judgment Against You* (Form 101A) and file it with this bankruptcy petition

Debtor 1 Jeff Peil Case number (if known) _____
First Name Middle Name Last Name

Part 3 Report About Any Businesses You Own as a Sole Proprietor

12. Are you a sole proprietor of any full- or part-time business? ☒ No. Go to Part 4.
☐ Yes. Name and location of business

A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.

If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.

Name of business, if any _____

Number _____ Street _____

City _____ State _____ ZIP Code _____

Check the appropriate box to describe your business:

- ☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))
☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))
☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))
☐ None of the above

13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?

For a definition of small business debtor, see 11 U.S.C. § 101(51D)

If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B)

- ☒ No I am not filing under Chapter 11.
☐ No I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.
☐ Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.

Part 4 Report If You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention

14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?
☒ No
☐ Yes. What is the hazard? _____

For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

If immediate attention is needed, why is it needed? _____

Where is the property? _____

Number _____ Street _____

City _____ State _____ ZIP Code _____

Debtor 1 **Jeff** **Peil**
First Name Middle Name Last Name

Case number (if known) _____

Part 6 Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one.

- ☒ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

- ☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you **MUST** file a copy of the certificate and payment plan, if any.

- ☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

- ☐ I am not required to receive a briefing about credit counseling because of:

- ☐ **Incapacity.** I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

- ☐ **Disability.** My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

- ☐ **Active duty.** I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one.

- ☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

- ☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you **MUST** file a copy of the certificate and payment plan, if any.

- ☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

- ☐ I am not required to receive a briefing about credit counseling because of:

- ☐ **Incapacity.** I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

- ☐ **Disability.** My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

- ☐ **Active duty.** I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debtor 1 Jeff Peil Case number (if known) _____
First Name Middle Name Last Name

Part 6 Answer These Questions for Reporting Purposes

16. What kind of debts do you have?

16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose "

- ☐ No. Go to line 16b
☒ Yes. Go to line 17

16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.

- ☐ No. Go to line 16c.
☐ Yes. Go to line 17

16c. State the type of debts you owe that are not consumer debts or business debts.

17. Are you filing under Chapter 7?

☐ No. I am not filing under Chapter 7. Go to line 18

Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?

- ☒ Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?
☐ No
☐ Yes

18. How many creditors do you estimate that you owe?

- | | | |
|--|--|--|
| <input checked="" type="checkbox"/> 1-49 | <input type="checkbox"/> 1,000-5,000 | <input type="checkbox"/> 25,001-50,000 |
| <input type="checkbox"/> 50-99 | <input type="checkbox"/> 5,001-10,000 | <input type="checkbox"/> 50,001-100,000 |
| <input type="checkbox"/> 100-199 | <input type="checkbox"/> 10,001-25,000 | <input type="checkbox"/> More than 100,000 |
| <input type="checkbox"/> 200-999 | | |

19. How much do you estimate your assets to be worth?

- | | | |
|--|--|--|
| <input checked="" type="checkbox"/> \$0-\$50,000 | <input type="checkbox"/> \$1,000,001-\$10 million | <input type="checkbox"/> \$500,000,001-\$1 billion |
| <input type="checkbox"/> \$50,001-\$100,000 | <input type="checkbox"/> \$10,000,001-\$50 million | <input type="checkbox"/> \$1,000,000,001-\$10 billion |
| <input type="checkbox"/> \$100,001-\$500,000 | <input type="checkbox"/> \$50,000,001-\$100 million | <input type="checkbox"/> \$10,000,000,001-\$50 billion |
| <input type="checkbox"/> \$500,001-\$1 million | <input type="checkbox"/> \$100,000,001-\$500 million | <input type="checkbox"/> More than \$50 billion |

20. How much do you estimate your liabilities to be?

- | | | |
|--|--|--|
| <input type="checkbox"/> \$0-\$50,000 | <input checked="" type="checkbox"/> \$1,000,001-\$10 million | <input type="checkbox"/> \$500,000,001-\$1 billion |
| <input type="checkbox"/> \$50,001-\$100,000 | <input type="checkbox"/> \$10,000,001-\$50 million | <input type="checkbox"/> \$1,000,000,001-\$10 billion |
| <input type="checkbox"/> \$100,001-\$500,000 | <input type="checkbox"/> \$50,000,001-\$100 million | <input type="checkbox"/> \$10,000,000,001-\$50 billion |
| <input type="checkbox"/> \$500,001-\$1 million | <input type="checkbox"/> \$100,000,001-\$500 million | <input type="checkbox"/> More than \$50 billion |

Part 7 Sign Below

For you


I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.

If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11, 12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.

If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both 18 U.S.C. §§ 152, 1341, 1519, and 3571.


Signature of Debtor 1

Executed on _____
MM / DD / YYYY


Signature of Debtor 2

Executed on _____
MM / DD / YYYY

Debtor 1 Jeff Peil
First Name Middle Name Last Name

Case number (if known) _____

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page.

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

x

Signature of Attorney for Debtor

Date

01/20/2016

MM / DD / YYYY

Howard Peritz

Printed name

The Law Offices of Howard Peritz

Firm name

1121 Lake Cook Road

Number Street

Suite P

Deerfield

City

IL

State

60015

ZIP Code

Contact phone 847 562 5880

Email address howard@howardperitzlaw.com

6187056

Bar number

IL

State

Debtor 1 Jeff Peil
First Name Middle Name Last Name

Case number (if known) _____

For you if you are filing this bankruptcy without an attorney

If you are represented by an attorney, you do not need to file this page.

The law allows you, as an individual, to represent yourself in bankruptcy court, but **you should understand that many people find it extremely difficult to represent themselves successfully. Because bankruptcy has long-term financial and legal consequences, you are strongly urged to hire a qualified attorney.**

To be successful, you must correctly file and handle your bankruptcy case. The rules are very technical, and a mistake or inaction may affect your rights. For example, your case may be dismissed because you did not file a required document, pay a fee on time, attend a meeting or hearing, or cooperate with the court, case trustee, U.S. trustee, bankruptcy administrator, or audit firm if your case is selected for audit. If that happens, you could lose your right to file another case, or you may lose protections, including the benefit of the automatic stay.

You must list all your property and debts in the schedules that you are required to file with the court. Even if you plan to pay a particular debt outside of your bankruptcy, you must list that debt in your schedules. If you do not list a debt, the debt may not be discharged. If you do not list property or properly claim it as exempt, you may not be able to keep the property. The judge can also deny you a discharge of all your debts if you do something dishonest in your bankruptcy case, such as destroying or hiding property, falsifying records, or lying. Individual bankruptcy cases are randomly audited to determine if debtors have been accurate, truthful, and complete. **Bankruptcy fraud is a serious crime; you could be fined and imprisoned.**

If you decide to file without an attorney, the court expects you to follow the rules as if you had hired an attorney. The court will not treat you differently because you are filing for yourself. To be successful, you must be familiar with the United States Bankruptcy Code, the Federal Rules of Bankruptcy Procedure, and the local rules of the court in which your case is filed. You must also be familiar with any state exemption laws that apply.

Are you aware that filing for bankruptcy is a serious action with long-term financial and legal consequences?

- ☐ No
☐ Yes

Are you aware that bankruptcy fraud is a serious crime and that if your bankruptcy forms are inaccurate or incomplete, you could be fined or imprisoned?

- ☐ No
☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out your bankruptcy forms?

- ☐ No
☐ Yes. Name of Person _____

Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)

By signing here, I acknowledge that I understand the risks involved in filing without an attorney. I have read and understood this notice, and I am aware that filing a bankruptcy case without an attorney may cause me to lose my rights or property if I do not properly handle the case.

X

Signature of Debtor 1

Date

MM / DD / YYYY

Contact phone

Cell phone

Email address

X

Signature of Debtor 2

Date

MM / DD / YYYY

Contact phone

Cell phone

Email address

Fill in this information to identify your case:			
Debtor 1	Jeff Peil		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)			
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: Northern District of Illinois			
Case number	(If known)		

☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Part 1 Summarize Your Assets

		Your assets Value of what you own
1. <i>Schedule A/B: Property</i> (Official Form 106A/B)		
1a. Copy line 55, Total real estate, from <i>Schedule A/B</i>		\$ _____
1b. Copy line 62, Total personal property, from <i>Schedule A/B</i>		\$ 9,350.00
1c. Copy line 63, Total of all property on <i>Schedule A/B</i>		\$ 9,350.00

Part 2 Summarize Your Liabilities

		Your liabilities Amount you owe
2. <i>Schedule D: Creditors Who Have Claims Secured by Property</i> (Official Form 106D)		
2a. Copy the total you listed in Column A, <i>Amount of claim</i> , at the bottom of the last page of Part 1 of <i>Schedule D</i>		\$ 2,000.00
3. <i>Schedule E/F: Creditors Who Have Unsecured Claims</i> (Official Form 106E/F)		
3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of <i>Schedule E/F</i>		\$ 0.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of <i>Schedule E/F</i>	+	\$ 11,998.89
Your total liabilities		\$ 13,998.89

Part 3 Summarize Your Income and Expenses

4. <i>Schedule I: Your Income</i> (Official Form 106I)		
Copy your combined monthly income from line 12 of <i>Schedule I</i>		\$ 3,134.47
5. <i>Schedule J: Your Expenses</i> (Official Form 106J)		
Copy your monthly expenses from line 22c of <i>Schedule J</i>		\$ 4,005.67

Debtor 1 **Jeff Peil**
First Name Middle Name Last Name

Case number (if known) _____

Part 4 Answer These Questions for Administrative and Statistical Records

6. Are you filing for bankruptcy under Chapters 7, 11, or 13?

- ☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.
☒ Yes

7. What kind of debt do you have?

- ☒ Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
☐ Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

8. From the **Statement of Your Current Monthly Income**. Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

\$ 4,443.00

9. Copy the following special categories of claims from Part 4, line 6 of **Schedule E/F**:

Total claim

From Part 4 on **Schedule E/F**, copy the following:

- 9a. Domestic support obligations (Copy line 6a.) \$ 0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.) \$ 0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) \$ 0.00
9d. Student loans. (Copy line 6f.) \$ 0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) \$ 0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) + \$ 0.00
9g. **Total**. Add lines 9a through 9f. \$ 0.00

Fill in this information to identify your case and this filing:

Debtor 1 Jeff Peil
First Name Middle Name Last Name
Debtor 2
(Spouse, if filing) First Name Middle Name Last Name Jeff
Peil
United States Bankruptcy Court for the: _____ District of _____
(State)
Case number _____

☐ Check if this is an amended filing

Official Form 106A/B

Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1 Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

1 Do you own or have any legal or equitable interest in any residence, building, land, or similar property?

- ☒ No. Go to Part 2.
☐ Yes. Where is the property?

1.1 _____
Street address, if available, or other description

City State ZIP Code

County

What is the property? Check all that apply

- ☐ Single-family home
☐ Duplex or multi-unit building
☐ Condominium or cooperative
☐ Manufactured or mobile home
☐ Land
☐ Investment property
☐ Timeshare
☐ Other _____

Who has an interest in the property? Check one

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number: _____

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D Creditors Who Have Claims Secured by Property*.

Current value of the entire property? \$ _____
Current value of the portion you own? \$ _____

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

☐ Check if this is community property (see instructions)

If you own or have more than one, list here.

1.2 _____
Street address, if available, or other description

City State ZIP Code

County

What is the property? Check all that apply

- ☐ Single-family home
☐ Duplex or multi-unit building
☐ Condominium or cooperative
☐ Manufactured or mobile home
☐ Land
☐ Investment property
☐ Timeshare
☐ Other _____

Who has an interest in the property? Check one

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number: _____

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D Creditors Who Have Claims Secured by Property*.

Current value of the entire property? \$ _____
Current value of the portion you own? \$ _____

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

☐ Check if this is community property (see instructions)

Debtor 1

Jeff

Peil

First Name

Middle Name

Last Name

Case number (if known)

1 3

Street address, if available, or other description

City State ZIP Code

County

What is the property? Check all that apply

- ☐ Single-family home
☐ Duplex or multi-unit building
☐ Condominium or cooperative
☐ Manufactured or mobile home
☐ Land
☐ Investment property
☐ Timeshare
☐ Other _____

Who has an interest in the property? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number: _____

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?

Current value of the portion you own?

\$ _____

\$ _____

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

2 Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here. →

\$0.00

Part 2 Describe Your VehiclesDo you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on *Schedule G, Executory Contracts and Unexpired Leases*.

3 Cars, vans, trucks, tractors, sport utility vehicles, motorcycles

- ☐ No
☒ Yes

3 1 Make Dodge
 Model: Ram
 Year 2001
 Approximate mileage: over 100000
 Other information

Who has an interest in the property? Check one.

- X ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ Check if this is community property (see instructions)Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?

Current value of the portion you own?

\$00.00

\$00.00

If you own or have more than one, describe here

3 2 Make Harley Davidson
 Model FXSTC Softail
 Year: 1992
 Approximate mileage: _____
 Other information:

Who has an interest in the property? Check one

- X ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ Check if this is community property (see instructions)Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?

Current value of the portion you own?

\$6,000.00

\$6000.00

Debtor 1

Jeff

Peil

First Name

Middle Name

Last Name

Case number (if known)

3.3. Make. _____
 Model. _____
 Year. _____
 Approximate mileage. _____
 Other information:

Who has an interest in the property? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ Check if this is community property (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property? \$ _____ Current value of the portion you own? \$ _____

3.4. Make. _____
 Model. _____
 Year. _____
 Approximate mileage. _____
 Other information:

Who has an interest in the property? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ Check if this is community property (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property? \$ _____ Current value of the portion you own? \$ _____

4 Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories

Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories

- ☐ No
☒ Yes

4.1. Make. Sure Trac
 Model. ST8218C H-B-07
 Year. 2014
 Other information:
Flat Bed Trailer

Who has an interest in the property? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ Check if this is community property (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property? \$ 3,000.00 Current value of the portion you own? \$ 800.00

If you own or have more than one, list here:

4.2. Make. _____
 Model. _____
 Year. _____
 Other information:

Who has an interest in the property? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ Check if this is community property (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property? \$ _____ Current value of the portion you own? \$ _____

5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here

→ \$8,300.00

Debtor 1

Jeff

Peil

First Name

Middle Name

Last Name

Case number (if known)

Part 3 Describe Your Personal and Household Items

Do you own or have any legal or equitable interest in any of the following items?

Current value of the portion you own?

Do not deduct secured claims or exemptions.

6. Household goods and furnishings

Examples: Major appliances, furniture, linens, china, kitchenware

☐ NoX ☒ Yes Describe..... Normal household goods and furnishings

\$50.00

7. Electronics

Examples: Televisions and radios, audio, video, stereo, and digital equipment, computers, printers, scanners, music collections, electronic devices including cell phones, cameras, media players, games

☐ NoX ☒ Yes Describe home computer

\$00.00

8. Collectibles of value

Examples: Antiques and figurines, paintings, prints, or other artwork, books, pictures, or other art objects, stamp, coin, or baseball card collections, other collections, memorabilia, collectibles

X ☒ No☐ Yes. Describe

\$

9. Equipment for sports and hobbies

Examples: Sports, photographic, exercise, and other hobby equipment, bicycles, pool tables, golf clubs, skis, canoes and kayaks; carpentry tools, musical instruments

X ☒ No☐ Yes. Describe

\$

10. Firearms

Examples: Pistols, rifles, shotguns, ammunition, and related equipment

X ☒ No☐ Yes. Describe ...

\$

11. Clothes

Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories

☐ NoX ☒ Yes. Describe ... every day apparel

\$00.00

12. Jewelry

Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver

X ☒ No☐ Yes. Describe

\$

13. Non-farm animals

Examples: Dogs, cats, birds, horses

X ☒ No☐ Yes. Describe ...

\$

14. Any other personal and household items you did not already list, including any health aids you did not listX ☒ No☐ Yes. Give specific information

\$

15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here

\$50.00



Debtor 1

Jeff

Peil

Document

Page 15 of 37

Case number (if known)

First Name

Middle Name

Last Name

Part 2**Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth.

Total claim

Nonpriority Creditor's Name

Number Street

City

State

ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☐ No
☐ Yes

Last 4 digits of account number _____

\$

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☐ Other. Specify _____

Nonpriority Creditor's Name

Number Street

City

State

ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☐ No
☐ Yes

Last 4 digits of account number _____

\$

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☐ Other. Specify _____

Nonpriority Creditor's Name

Number Street

City

State

ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☐ No
☐ Yes

Last 4 digits of account number _____

\$

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☐ Other. Specify _____

Debtor 1

Jeff

Peil

First Name

Middle Name

Last Name

Case number (if known)

20. Government and corporate bonds and other negotiable and non-negotiable instruments*Negotiable instruments* include personal checks, cashiers' checks, promissory notes, and money orders.*Non-negotiable instruments* are those you cannot transfer to someone by signing or delivering them.☒ No☐ Yes. Give specific information about them

Issuer name

\$

\$

\$

21. Retirement or pension accounts*Examples:* Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans☒ No☐ Yes. List each account separately.

Type of account:

Institution name:

401(k) or similar plan:

\$

Pension plan:

\$

IRA:

\$

Retirement account:

\$

Keogh:

\$

Additional account:

\$

Additional account:

\$

22. Security deposits and prepayments

Your share of all unused deposits you have made so that you may continue service or use from a company

Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others☒ No☐ Yes

Institution name or individual:

Electric:

\$

Gas:

\$

Heating oil:

\$

Security deposit on rental unit:

\$

Prepaid rent:

\$

Telephone:

\$

Water:

\$

Rented furniture:

\$

Other:

\$

23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)☒ No☐ Yes

Issuer name and description

\$

\$

\$

Debtor 1

Jeff

Peil

First Name

Middle Name

Last Name

Case number (if known)

24 Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

☒ No☐ Yes

Institution name and description. Separately file the records of any interests 11 U.S.C. § 521(c)

\$ _____

\$ _____

\$ _____

25 Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit☒ No☐ Yes. Give specific information about them.

\$ _____

26 Patents, copyrights, trademarks, trade secrets, and other intellectual property

Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

☒ No☐ Yes. Give specific information about them

\$ _____

27. Licenses, franchises, and other general intangibles

Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

☒ No☐ Yes. Give specific information about them

\$ _____

Money or property owed to you?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

28. Tax refunds owed to you☒ No☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years.

Federal: \$ _____

State: \$ _____

Local: \$ _____

29. Family support

Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

☒ No☐ Yes. Give specific information

Alimony: \$ _____

Maintenance: \$ _____

Support: \$ _____

Divorce settlement: \$ _____

Property settlement: \$ _____

30 Other amounts someone owes you

Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits, unpaid loans you made to someone else

☒ No☐ Yes. Give specific information

\$ _____

Debtor 1

Jeff

Peil

First Name

Middle Name

Last Name

Case number (if known)

31. Interests in insurance policies*Examples:* Health, disability, or life insurance, health savings account (HSA); credit, homeowner's, or renter's insurance☒ No☐ Yes Name the insurance company of each policy and list its value.

Company name.

Beneficiary

Surrender or refund value

\$

\$

\$

32. Any interest in property that is due you from someone who has died

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died

☒ No☐ Yes. Give specific information.

\$

33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment*Examples:* Accidents, employment disputes, insurance claims, or rights to sue☒ No☐ Yes Describe each claim

\$

34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims☒ No☐ Yes Describe each claim

\$

35. Any financial assets you did not already list☒ No☐ Yes Give specific information

\$

36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here

\$00.00

Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.**37. Do you own or have any legal or equitable interest in any business-related property?**☒ No Go to Part 6☐ Yes Go to line 38Current value of the portion you own?
Do not deduct secured claims or exemptions.**38. Accounts receivable or commissions you already earned**☐ No☐ Yes Describe

\$

39. Office equipment, furnishings, and supplies*Examples:* Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices☐ No☐ Yes Describe

\$

Debtor 1

Jeff

Peil

First Name

Middle Name

Last Name

Case number (if known)

40 Machinery, fixtures, equipment, supplies you use in business, and tools of your trade☒ No☐ Yes. Describe

\$

41 Inventory☒ No☐ Yes. Describe

\$

42 Interests in partnerships or joint ventures☒ No☐ Yes. Describe

Name of entity:

% of ownership

 %
 %
 %

 \$
 \$
 \$
43 Customer lists, mailing lists, or other compilations☒ No☐ Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))?☐ No☐ Yes. Describe

\$

44 Any business-related property you did not already list☒ No☐ Yes. Give specific information

 \$
 \$
 \$
 \$
 \$
 \$
45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here

\$00

Part 6**Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.**
If you own or have an interest in farmland, list it in Part 1.**46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?**☒ No. Go to Part 7☐ Yes. Go to line 47**Current value of the portion you own?**

Do not deduct secured claims or exemptions.

47 Farm animals

Examples: Livestock, poultry, farm-raised fish

☐ No☐ Yes

\$

Debtor 1

Jeff

Peil

First Name

Middle Name

Last Name

Case number (if known)

48. Crops—either growing or harvested☐ No☐ Yes Give specific information

\$

49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade☐ No☐ Yes

\$

50. Farm and fishing supplies, chemicals, and feed☐ No☐ Yes

\$

51. Any farm- and commercial fishing-related property you did not already list☐ No☐ Yes Give specific information

\$

52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here

\$0.00

Part 7a**Describe All Property You Own or Have an Interest in That You Did Not List Above****53. Do you have other property of any kind you did not already list?***Examples. Season tickets, country club membership*X ☒ No☐ Yes. Give specific information

\$

\$

\$

54. Add the dollar value of all of your entries from Part 7. Write that number here

\$0.00

Part 8:**List the Totals of Each Part of this Form****55. Part 1: Total real estate, line 2....**

\$0.00

56. Part 2: Total vehicles, line 5

\$300.00

57. Part 3: Total personal and household items, line 15

\$

58. Part 4: Total financial assets, line 36

\$0.00

59. Part 5: Total business-related property, line 45

\$0.00

60. Part 6: Total farm- and fishing-related property, line 52

\$0.00

61. Part 7: Total other property not listed, line 54

+\$0.00

62. Total personal property. Add lines 56 through 61.

\$150.00

Copy personal property total →

+\$150.00

63. Total of all property on Schedule A/B. Add line 55 + line 62..

\$2,150.00

Fill in this information to identify your case:

Debtor 1	Jeff	Peil
	First Name	Last Name
Debtor 2		
(Spouse, if filing)	First Name	Last Name
United States Bankruptcy Court for the:	Northern	District of Illinois
		(State)
Case number (if known)		

☐ Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2. Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1 Identify the Property You Claim as Exempt

1 Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you

- ☒ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2 For any property you list on *Schedule A/B* that you claim as exempt, fill in the information below.

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from <i>Schedule A/B</i>	Check only one box for each exemption	
Brief description: Motorcycle Line from <i>Schedule A/B</i> : 3.2	\$000.00	<input checked="" type="checkbox"/> \$000.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	735-5/12-1001(c), 735-5/12-1001(b)
Brief description: Clothing Line from <i>Schedule A/B</i> : 11	\$00.00	<input checked="" type="checkbox"/> \$00.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	735-5/12-1001(a)
Brief description: _____ Line from <i>Schedule A/B</i> : _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____

3. Are you claiming a homestead exemption of more than \$155,675?

(Subject to adjustment on 4/01/16 and every 3 years after that for cases filed on or after the date of adjustment.)

- ☒ No
☐ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?
☐ No
☐ Yes

Debtor 1 first1 middle1 last1 Case number (if known) case number
First Name Middle Name Last Name

Part 2

Additional Page

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption	Specific laws that allow exemption
Brief description: _____ Line from Schedule A/B: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Brief description: _____ Line from Schedule A/B: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Brief description: _____ Line from Schedule A/B: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Brief description: _____ Line from Schedule A/B: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Brief description: _____ Line from Schedule A/B: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Brief description: _____ Line from Schedule A/B: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Brief description: _____ Line from Schedule A/B: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Brief description: _____ Line from Schedule A/B: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Brief description: _____ Line from Schedule A/B: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Brief description: _____ Line from Schedule A/B: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Brief description: _____ Line from Schedule A/B: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Brief description: _____ Line from Schedule A/B: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Brief description: _____ Line from Schedule A/B: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Brief description: _____ Line from Schedule A/B: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Brief description: _____ Line from Schedule A/B: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____

Fill in this information to identify your case:

Debtor 1 Jeff Peil
First Name Middle Name Last Name

Debtor 2
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the Peil District of Jeff
(State)

Case number
(if known)

☐ Check if this is an amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

1. Do any creditors have claims secured by your property?

- ☐ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
- ☐ Yes. Fill in all of the information below.

Part 1 List All Secured Claims

	Column A Amount of claim Do not deduct the value of collateral	Column B Value of collateral that supports this claim	Column C Unsecured portion if any
2.1			
FLCC Financing Corp Creditor's Name 103 20th Street NE Number Street Suite 4 Stewartville MN 55976 City State ZIP Code	Describe the property that secures the claim: 2014 flat bed trailer	2000 00	1800 00
As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed			
Who owes the debt? Check one <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another			
Nature of lien Check all that apply <input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset)			
<input type="checkbox"/> Check if this claim relates to a community debt			
Date debt was incurred Last 4 digits of account number			
2.2			
Creditor's Name Number Street City State ZIP Code	Describe the property that secures the claim:	\$	\$
As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed			
Who owes the debt? Check one <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another			
Nature of lien Check all that apply <input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset)			
<input type="checkbox"/> Check if this claim relates to a community debt			
Date debt was incurred Last 4 digits of account number			
Add the dollar value of your entries in Column A on this page. Write that number here: 3,000.00			

Fill in this information to identify your case:

Debtor 1 Jeff Peil
First Name Middle Name Last Name

Debtor 2
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: Northern District of Illinois
(State)

Case number _____
(If known)

☐ Check if this is an amended filing

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Property* (Official Form 106A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G). Do not include any creditors with partially secured claims that are listed in *Schedule D: Creditors Who Have Claims Secured by Property*. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

Part 1 List All of Your PRIORITY Unsecured Claims

	Total claim	Priority amount	Nonpriority amount
2 1			
<p>1. Do any creditors have priority unsecured claims against you?</p> <p>X <input type="checkbox"/> No Go to Part 2.</p> <p><input type="checkbox"/> Yes.</p> <p>2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)</p>			
<p>Priority Creditor's Name _____</p> <p>Number _____ Street _____</p> <p>City _____ State _____ ZIP Code _____</p> <p>Who incurred the debt? Check one.</p> <p><input type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p> <p>Last 4 digits of account number _____ \$ _____ \$ _____ \$ _____</p> <p>When was the debt incurred? _____</p> <p>As of the date you file, the claim is: Check all that apply</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Type of PRIORITY unsecured claim:</p> <p><input type="checkbox"/> Domestic support obligations</p> <p><input type="checkbox"/> Taxes and certain other debts you owe the government</p> <p><input type="checkbox"/> Claims for death or personal injury while you were intoxicated</p> <p><input type="checkbox"/> Other Specify _____</p>			
2 2			
<p>Priority Creditor's Name _____</p> <p>Number _____ Street _____</p> <p>City _____ State _____ ZIP Code _____</p> <p>Who incurred the debt? Check one.</p> <p><input type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p> <p>Last 4 digits of account number _____ \$ _____ \$ _____ \$ _____</p> <p>When was the debt incurred? _____</p> <p>As of the date you file, the claim is: Check all that apply</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Type of PRIORITY unsecured claim:</p> <p><input type="checkbox"/> Domestic support obligations</p> <p><input type="checkbox"/> Taxes and certain other debts you owe the government</p> <p><input type="checkbox"/> Claims for death or personal injury while you were intoxicated</p> <p><input type="checkbox"/> Other Specify _____</p>			

Debtor 1

Jeff

Peil

Document

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First Name Middle Name Last Name

Case number (if known)

Part 2 List All of Your NONPRIORITY Unsecured Claims**3. Do any creditors have nonpriority unsecured claims against you?**

- ☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules.
☒ Yes

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

4.1 North Shore Endoscopy

Nonpriority Creditor's Name

1010 S. Waukegan Road, Suite 980

Number Street

Lake Bluff

IL

60044

City

State

ZIP Code

Last 4 digits of account number 3 9 8 1

Total claim

\$ 480 00

When was the debt incurred? 02/12/2015

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☐ Other Specify _____

Who incurred the debt? Check one.

- X ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

- X ☒ No
☐ Yes

4.2 Consumers Cooperative Credit Union C/O Trunkett & Trunkett, P.C.

Nonpriority Creditor's Name

20 N. Wacker Drive, Suite 1434

Number Street

Chicago

IL

60606

City

State

ZIP Code

Last 4 digits of account number 6 1 3

\$ 626 78

When was the debt incurred? 07/22/2013

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☐ Other Specify _____

Who incurred the debt? Check one.

- X ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

- X ☒ No
☐ Yes

4.3 NICOR

Nonpriority Creditor's Name

P.O. Box 5407

Number Street

Carol Stream

IL

60197

City

State

ZIP Code

Last 4 digits of account number 1 2 6

\$ 111 52

When was the debt incurred? 04/08/2015

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☐ Other Specify _____

Who incurred the debt? Check one.

- X ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

- X ☒ No
☐ Yes

Debtor 1

Jeff

Peil

Document

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Case number (if known)

First Name Middle Name Last Name

Part 2**Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth.

Total claim

4.4

Lakeshore Gastroenterology

Nonpriority Creditor's Name

P.O. Box 7630

Number Street

Gurnee

IL

60031

City

State

ZIP Code

Who incurred the debt? Check one.

- X ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

- X ☐ No
☐ Yes

Last 4 digits of account number 0 7 4

705.00

When was the debt incurred? 02/01/2015

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☐ Other Specify _____

4.5

Midwest Anes Partnership

Nonpriority Creditor's Name

P.O. Box 1123

Number Street

Jackson

MI

49204

City

State

ZIP Code

Who incurred the debt? Check one.

- X ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

- X ☐ No
☐ Yes

Last 4 digits of account number 3 8 0 5

448.80

When was the debt incurred? 2/12/2015

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☐ Other Specify _____

4.6

Comcast

Nonpriority Creditor's Name

P.O. Box 3002

Number Street

Southeastern

PA

19396

City

State

ZIP Code

Who incurred the debt? Check one.

- X ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

- X ☐ No
☐ Yes

Last 4 digits of account number 5 0 6 9

273.34

When was the debt incurred? 3/15/2015

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☐ Other Specify _____

Debtor 1

Jeff

Peil

Document

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Case number (if known)

First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth.

Total claim

4.7

Pediatric & Family Dental

Nonpriority Creditor's Name

389 Center Street

Number Street

Grayslake

IL

60030

City

State

ZIP Code

Who incurred the debt? Check one.

X

☐ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

X

☐ No☐ Yes

Last 4 digits of account number

169.25

When was the debt incurred? 02/01/2015

As of the date you file, the claim is: Check all that apply

☐ Contingent☐ Unliquidated☐ Disputed

Type of NONPRIORITY unsecured claim.

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☐ Other. Specify

4.8

McHenry Radiologists c/o OAC

Nonpriority Creditor's Name

P.O. Box 371100

Number Street

Milwaukee

WI

53237

City

State

ZIP Code

Who incurred the debt? Check one.

☐ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☐ No☐ Yes

Last 4 digits of account number 6 5 8 1

738.00

When was the debt incurred? 08/08/2013

As of the date you file, the claim is: Check all that apply

☐ Contingent☐ Unliquidated☐ Disputed

Type of NONPRIORITY unsecured claim.

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☐ Other. Specify

4.9

Nonpriority Creditor's Name

Number Street

City

State

ZIP Code

Who incurred the debt? Check one.

☐ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☐ No☐ Yes

Last 4 digits of account number

\$

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

☐ Contingent☐ Unliquidated☐ Disputed

Type of NONPRIORITY unsecured claim

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☐ Other. Specify

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth.

Total claim

4.10

Midwest Anes Partners

Nonpriority Creditor's Name

P.O. Box 1123

Number Street

Jackson

MI

49204

City

State

ZIP Code

Who incurred the debt? Check one.

- X ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

- X ☐ No
☐ Yes

Last 4 digits of account number 2 8 0 5

448.80

When was the debt incurred? 03/25/2015

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☐ Other Specify _____

Last 4 digits of account number _____ \$ _____

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☐ Other Specify _____

Last 4 digits of account number _____ \$ _____

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim.

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☐ Other. Specify _____

Debtor 1

Jeff

Peil

Document

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Case number (if known)

First Name

Middle Name

Last Name

Part 4**Add the Amounts for Each Type of Unsecured Claim**

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

Total claim**Total claims from Part 1**

6a Domestic support obligations

6a \$ 0.00

6b Taxes and certain other debts you owe the government

6b \$ 0.00

6c. Claims for death or personal injury while you were intoxicated

6c \$ 0.00

6d. Other. Add all other priority unsecured claims. Write that amount here.

6d. + \$ 0.00

6e. Total. Add lines 6a through 6d

6e. \$ 0.00

Total claim**Total claims from Part 2**

6f Student loans

6f \$ 0.00

6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims

6g. \$ 0.00

6h. Debts to pension or profit-sharing plans, and other similar debts

6h. \$ 0.00

6i. Other. Add all other nonpriority unsecured claims. Write that amount here.

6i. + \$ 0.00

6j Total. Add lines 6f through 6i

6j \$ 0.00

Fill in this information to identify your case:

Debtor Jeff Peil
First Name Middle Name Last Name
Debtor 2
(Spouse if filing) First Name Middle Name Last Name
United States Bankruptcy Court for the Northern District of Illinois
(State)
Case number
(If known)

☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

1 Do you have any executory contracts or unexpired leases?

- ☒ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
☐ Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Property* (Official Form 106A/B).

2 List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

2.1

Name
Number Street
City State ZIP Code

2.2

Name
Number Street
City State ZIP Code

2.3

Name
Number Street
City State ZIP Code

2.4

Name
Number Street
City State ZIP Code

2.5

Name
Number Street
City State ZIP Code

Fill in this information to identify your case:

Debtor 1 Jeff Peil
First Name Middle Name Last Name

Debtor 2
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the Northern District of Illinois
(State)

Case number
(If known)

☐ Check if this is an amended filing

Official Form 106H

Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor)

☒ No

☐ Yes

2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin)

☐ No Go to line 3.

☐ Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?

☐ No

☐ Yes In which community state or territory did you live? _____ Fill in the name and current address of that person.

Name of your spouse, former spouse, or legal equivalent

Number Street

City State ZIP Code

3 In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

3.1

Name

Number Street

City State ZIP Code

☐ Schedule D, line _____

☐ Schedule E/F, line _____

☐ Schedule G, line _____

3.2

Name

Number Street

City State ZIP Code

☐ Schedule D, line _____

☐ Schedule E/F, line _____

☐ Schedule G, line _____

3.3

Name

Number Street

City State ZIP Code

☐ Schedule D, line _____

☐ Schedule E/F, line _____

☐ Schedule G, line _____

Fill in this information to identify your case:

Debtor 1 Jeff Peil
First Name Middle Name Last Name

Debtor 2
 (Spouse, if filing)
First Name Middle Name Last Name

United States Bankruptcy Court for the Northern District of Illinois
(State)

Case number
 (If known)

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing postpetition chapter 13 income as of the following date:

MM / DD / YYYY

Official Form 1061

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1 Describe Employment

1 Fill in your employment information.

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

Employment status

☒ Employed
☐ Not employed

☐ Employed
☐ Not employed

Occupation

Mechanic

Employer's name

Employer's address

Number Street

Number Street

City State ZIP Code

City State ZIP Code

How long employed there?

Part 2 Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

	<u>For Debtor 1</u>	<u>For Debtor 2 or non-filing spouse</u>
2 List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be	2 <u>\$ 1,167.26</u>	<u>\$</u>
3 Estimate and list monthly overtime pay.	3 <u>+\$</u>	<u>+\$</u>
4 Calculate gross income. Add line 2 + line 3	4 <u>\$ 1,167.26</u>	<u>\$ 0.00</u>

Debtor 1 Jeff Peil Case number (if known) _____
 First Name Middle Name Last Name

	For Debtor 1	For Debtor 2 or non-filing spouse
Copy line 4 here... → 4	\$ 4,167.26	\$ 0.00
5 List all payroll deductions:		
5a Tax, Medicare, and Social Security deductions	\$ 1,032.79	\$
5b Mandatory contributions for retirement plans	\$	\$
5c Voluntary contributions for retirement plans	\$	\$
5d Required repayments of retirement fund loans	\$	\$
5e Insurance	\$	\$
5f Domestic support obligations	\$	\$
5g Union dues	\$	\$
5h Other deductions. Specify _____	\$ +	\$ +
6 Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h	\$ 1,032.79	\$ 0.00
7 Calculate total monthly take-home pay. Subtract line 6 from line 4.	\$ 3,134.47	\$ 0.00
8 List all other income regularly received:		
8a Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	\$	\$
8b Interest and dividends	\$	\$
8c Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	\$	\$
8d Unemployment compensation	\$	\$
8e Social Security	\$	\$
8f Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies Specify _____	\$	\$
8g Pension or retirement income	\$	\$
8h Other monthly income. Specify _____	\$ +	\$ +
9 Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h	\$ 0.00	\$ 0.00
10 Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	\$ 3,134.47	\$ 0.00
11 State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J Specify _____	11 + \$	
12 Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies	12 \$ 3,134.47 Combined monthly income	
13 Do you expect an increase or decrease within the year after you file this form? <input type="checkbox"/> No. <input type="checkbox"/> Yes Explain. _____		

Fill in this information to identify your case:			
Debtor 1	Jeff		Peil
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the	Northern	District of	Illinois
			(State)
Case number			
(If known)			

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing postpetition chapter 13 expenses as of the following date:

MM / DD / YYYY

Official Form 106J

Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1 Describe Your Household

1 Is this a joint case?

- ☐ No. Go to line 2.
- ☐ Yes. Does Debtor 2 live in a separate household?
- ☐ No
- ☐ Yes. Debtor 2 must file Official Form 106J-2, *Expenses for Separate Household of Debtor 2*

2 Do you have dependents?

☐ No

☒ Yes. Fill out this information for each dependent.

Dependent's relationship to Debtor 1 or Debtor 2

Dependent's age

Does dependent live with you?

Do not list Debtor 1 and Debtor 2.

Do not state the dependents' names

Son

15

☒ No
☐ Yes

Son

9

☒ No
☐ Yes

☐ No
☐ Yes

☐ No
☐ Yes

☐ No
☐ Yes

3 Do your expenses include expenses of people other than yourself and your dependents?

☒ No
☐ Yes

Part 2 Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental *Schedule J*, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on *Schedule I: Your Income* (Official Form 106I.)

4 The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

If not included in line 4:

4a Real estate taxes

4b. Property, homeowner's, or renter's insurance

4c. Home maintenance, repair, and upkeep expenses

4d Homeowner's association or condominium dues

Your expenses

\$ 1,000.00

4

4a.

\$

4b.

\$

4c.

\$

4d.

\$

Debtor 1 Jeff Peil
First Name Middle Name Last Name

Case number (if known) _____

Your expenses

5. **Additional mortgage payments for your residence, such as home equity loans** 5. \$ _____
6. **Utilities:**
- 6a. Electricity, heat, natural gas 6a. \$44.00
- 6b. Water, sewer, garbage collection 6b. \$5.00
- 6c. Telephone, cell phone, Internet, satellite, and cable services 6c. \$ _____
- 6d. Other. Specify _____ 6d. \$ _____
7. **Food and housekeeping supplies** 7. \$ _____
8. **Childcare and children's education costs** 8. \$50.00
9. **Clothing, laundry, and dry cleaning** 9. \$ _____
10. **Personal care products and services** 10. \$ _____
11. **Medical and dental expenses** 11. \$ _____
12. **Transportation.** Include gas, maintenance, bus or train fare
Do not include car payments. 12. \$350.00
13. **Entertainment, clubs, recreation, newspapers, magazines, and books** 13. \$ _____
14. **Charitable contributions and religious donations** 14. \$ _____
15. **Insurance.**
Do not include insurance deducted from your pay or included in lines 4 or 20.
- 15a. Life insurance 15a. \$ _____
- 15b. Health insurance 15b. \$65.00
- 15c. Vehicle insurance 15c. \$70.00
- 15d. Other insurance Specify: _____ 15d. \$ _____
16. **Taxes.** Do not include taxes deducted from your pay or included in lines 4 or 20
Specify. _____ 16. \$ _____
17. **Installment or lease payments:**
- 17a. Car payments for Vehicle 1 17a. \$ _____
- 17b. Car payments for Vehicle 2 17b. \$ _____
- 17c. Other Specify _____ 17c. \$ _____
- 17d. Other. Specify: _____ 17d. \$ _____
18. **Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).** 18. \$11.67
19. **Other payments you make to support others who do not live with you.**
Specify _____ 19. \$ _____
20. **Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.**
- 20a. Mortgages on other property 20a. \$ _____
- 20b. Real estate taxes 20b. \$ _____
- 20c. Property, homeowner's, or renter's insurance 20c. \$ _____
- 20d. Maintenance, repair, and upkeep expenses 20d. \$ _____
- 20e. Homeowner's association or condominium dues 20e. \$ _____

Debtor 1 Jeff Peil
First Name Middle Name Last Name

Case number (if known) _____

21. Other. Specify: _____

21 +\$ _____

22 Calculate your monthly expenses.

22a. Add lines 4 through 21

22a \$4,005.67

22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2

22b \$ _____

22c. Add line 22a and 22b. The result is your monthly expenses

22c \$4,005.67

23 Calculate your monthly net income.

23a. Copy line 12 (your combined monthly income) from Schedule I.

23a. \$ _____

23b. Copy your monthly expenses from line 22c above.

23b. -4,005.67

23c. Subtract your monthly expenses from your monthly income.
The result is your *monthly net income*.

23c. \$4,005.67

24 Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

☐ No

☐ Yes.

Explain here.

Fill in this information to identify your case:

Debtor 1 Jeff Peil
First Name Middle Name Last Name

Debtor 2
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: Northern District of Illinois

Case number _____
(If known)

☐ Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

☒ No

☐ Yes. Name of person _____ . Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

x

Signature of Debtor 1

x

Signature of Debtor 2

Date 02/19/2016
MM / DD / YYYY

Date _____
MM / DD / YYYY